

Juneau County Crime Stoppers, Inc.

P.O. Box 292 Mauston, WI 53948
1-800-826-TIPS

Authorization to Release Criminal Case Information to Juneau County Crime Stoppers, Inc.

Type of Offense Date of Offense OCA#

I, _____, am the ☐ Victim, ☐ Witness, ☐ Manager, ☐ Property Owner
Print your Name

Of the Property located at: _____.

I hereby authorize any and all Law Enforcement agencies to release information regarding the above listed Criminal Case to the New Media. I release this information with the understanding that the information will be used to further the investigative effort.

Signature Date

Witness Date

☐ I do not wish to participate in the Crime Stoppers program. (Complete the top but do not sign the form)

*This form was either E-mailed to you or you have downloaded it from juneaucounty.com. Please print the form out, complete it by hand, and mail it back to:

Juneau County Sheriff's Department
200 Oak Street
Mauston, WI 53948

ATTN: _____
Investigating Officer